

Deposit Account Maintenance



Deposit Account Window Help



Deposit Account

Number: 232415

Balance Amount: 135.86

Holder

Name: WILSON, SONSINI, GOODRICH & ROSATI PC



Address

Attention: JANE SILARAJIS 1117-L

Street: 650 PAGE MILL ROAD

Province:

City: PALO ALTO

State: CA

Postal Code: 94304-1050

Country: US

Telephone: 650-493-9300 X 6208

Fax: 650-845-5000

Details

Category Code: NONGOVNMNT

Type: REGULAR

Notification Amt: 0.00

Status

Access Code:

☒ Active

☐ Closed

CNGUYEN

11/28/2005

NOTICE OF FEE DUE

DATE:

11-2805

TO:

10814769

FROM:

Office of Initial Patent Examination

SUBJECT:

Fee Due

APPLICATION NUMBER

10814769

A fee is due for the attached document submitted to the U.S. Patent and Trademark Office for the following reason. Please check the application for the appropriate authorizations to charge a deposit account if an authorization is present, please charge the Appropriate Fee. If and authorization is not present, notify the applicant of the fee deficiency.

☐

Insufficient fee by check

☐

Insufficient funds in deposit amount

☐

Insufficient by Credit Card

☐

Declined credit card

☐

Non-authorization for charge to deposit account

☐

No fee submitted per requirement

The correct fee code: _____

Amount

\$ _____

The suspended fee code: 1999

Amount

\$ _____

The suspended 1622

Amount

\$ _____

The suspended 2622

Amount

\$ _____

Fee Due

\$ _____

Terminal Operator

AN